



Massachusetts Department of Environmental Protection
Bureau of Resource Protection – Watershed Management

BRP WM 08 A NPDES Stormwater General Permit

Stormwater General Permit Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

Instructions and Supporting Materials

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Introduction

DEP *Permit Applications*, as well as *Instructions & Support Materials*, are available for download from the DEP Web site at www.mass.gov/dep/appkits/forms.htm in two file formats: Microsoft Word and Adobe Acrobat PDF. Either format allows documents to be printed.

Instructions & Support Materials files in Microsoft Word format contain a series of documents that provide guidance on how to prepare a permit application. Although we recommend that you print out the entire package, you may choose to print specific documents by selecting the appropriate page numbers for printing.

Permit Applications in Microsoft Word format must be downloaded separately. Users with Microsoft Word 97 or later may complete these forms electronically.

Permitting packages in Adobe Acrobat PDF format combine *Permit Applications* and *Instructions & Support Materials* in a single document. Adobe Acrobat PDF files may only be viewed and printed without alteration. *Permit Applications* in this format may not be completed electronically.



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1. What is the purpose of the WM 08A Notice of Intent for MS4s?

All operators of storm sewer discharges from small Municipal Separate Storm Sewer Systems (MS4s), within the boundaries of urbanized areas of Massachusetts, designated by the U.S. Census Bureau and EPA's NPDES Storm Water Phase II Regulations, are required to obtain coverage under a National Pollutant Discharge Elimination System (NPDES) Stormwater Phase II General permit for MS4s. Operators in Massachusetts seeking coverage under this general permit are required to submit to DEP the WM 08A Notice of Intent for MS4s prior to authorization under the general permit.

Statutory and regulatory authority for this general permit can be found at Section 402(p) (6) of the Federal Clean Water Act, the Massachusetts Clean Water Act, MGL Chapter 21, s. 26-53 and 314 CMR 3.00 and 314 CMR 4.00.

2. Who must apply?

Automatically designated operators of small municipal separate storm sewer systems required to obtain coverage under the NPDES General Permit for MS4s include:

- a. municipalities;
- b. state or federally owned systems (such as universities, prisons, military bases, large hospitals) located within the boundaries of an urbanized area of Massachusetts; and,
- c. transportation entities, located within the boundaries of an urbanized area of Massachusetts.

Coverage is required unless the Department determines that such an automatically designated small MS4 meets the criteria for a waiver, as determined by EPA and the Department, or is subject to an individual surface water discharge permit issued pursuant to 314 CMR 3.00.

3. What other requirements should be considered?

a. In addition to obtaining a copy of the NPDES General Permit for Storm Water Discharges from Small Municipal Separate Storm Sewer Systems from U.S. EPA Region I at <http://www.epa.gov/ne/npdes/stormwater/index.html>, and filing the appropriate forms with the Massachusetts DEP, an applicant must also submit a Notice of Intent with EPA to obtain coverage under the permit. The information provided by the applicant on DEP's WM 08A Notice of Intent for MS4s will be accepted by EPA as their Notice of Intent, if all signatures are original.

b. For further information, call DEP's Division of Watershed Management at 508-792-7470.

4. What is the application fee?

The application fee for BRP WM 08A is \$80.

Fee exemption for BRP WM 08A applies to any Massachusetts city, town, or state agency.

The fee does apply to Massachusetts state authorities.



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5. What is the Primary Permitting Location?

Department of Environmental Protection
Division of Watershed Management
627 Main Street, 2nd Floor
Worcester, MA 01608

There is no reserve copy location for the stormwater general permit Notice of Intent for MS4s.

6. What are the timelines?

As of July 1, 1992, the timelines are:

	AC	T1	T2*
BRP WM 08A	30	30	20

*A second technical review will be conducted only if necessary.

There is no public comment review period for the stormwater general permit Notice of Intent for MS4s.

7. What is the annual compliance fee?

There is no annual compliance fee for the stormwater general permit for MS4s.

8. How long is the permit in effect?

The permit, unless modified by DEP, continues in effect for the five-year duration of EPA's General Permit.

9. How can I avoid the most common mistakes made in submitting the Notice of Intent for MS4s?

a. Complete all forms associated with BRP WM 08A including the Notice of Intent Program Time Frames form.

b. Submit one copy of the DEP Transmittal Form, along with a copy of the BRPWM08A to:

Department of Environmental Protection
Division of Watershed Management
627 Main Street, 2nd Floor
Worcester, MA 01608

b. Both fee-paying and exempt applicants must mail one copy of the DEP Transmittal Form to:

Department of Environmental Protection
P. O. Box 4062
Boston, MA 02211



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- d. Check the following website which lists the EPA designated Stormwater Phase II communities in Massachusetts, www.mass.gov/dep/brp/stormwtr/stormlis.htm.
- e. Check the following EPA website for maps of the designated Stormwater Phase II communities in Massachusetts,
<http://www.epa.gov/region01/steward/stormwater/ma.html>.

10. What are the state regulations that apply to the WM 08A stormwater general permit Notice of Intent for MS4s? Where can I get copies?

These regulations include, but are not limited to:

- a. Surface Water Discharge Programs, 314 CMR 3.00.
- b. Surface Water Quality Standards, 314 CMR 4.00.
- c. Timely Action Schedule and Fee Provisions, 310 CMR 4.00.

While not the “official version” of the Regulations, they may be viewed on DEP’s website at www.ma.gov/dep/matrix.htm

Official versions of all state statutes and regulations are only available for purchase at:

State Bookstore (in State House)
Room 116
Boston, MA 02133
617-727-2834

State Bookstore
436 Dwight Street
Springfield, MA 01103
413-784-1376



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Application instructions for BRP WM 08A Notice of Intent, including the Stormwater Management Program Summary Section and Time Frames form.

Item-by-Item Instructions

Enter the transmittal form number at the top of each page of BRP WM 08A.

Part A Instructions

Read carefully. Please note that BRP WM 08A includes the Stormwater General Permit Notice of Intent Form and the Time Frames form.

Part B Applicant Information

Item 1.

Provide the name, address, phone number and email address of the municipality's contact person responsible for the overall coordination of the MS4 stormwater management program.

Item 2.

Provide the full name of the municipality

Item 3.

Identify the legal status of the operator of the MS4.

Item 4.

If the municipality is a city or town, list other MS4s within its boundaries, such as state highways, universities, and prisons.

Item 5.

Part 1 of the MS4 General Permit describes eligibility. You must determine your eligibility status with respect to:

1. Federal endangered species and critical habitat information; and,
2. Federal Historic properties

Document your eligibility investigation, the logic of your determination, and retain the record. Use the results of your eligibility investigation for "listed species" and critical habit to mark the appropriate box for Item 5.

Item 6.

Use the results of your eligibility investigation for historic properties to mark the appropriate box for Item 6.

Part C. Names of (Presently Known) Receiving Waters

List the waters currently known to receive discharge from the MS4. Use names from USGS topographic quadrangles as the standard. For unnamed waters, give a designation that indicates



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where the water goes, using the first named water downstream, e.g. “wetland tributary to Blackstone River,” or “intermittent stream to Guggins Brook.”

For each listed water:

- Indicate the number of outfalls discharging thereto;
- Determine whether the water is impaired and check the appropriate box; and,
- If impaired, provide the type of impairment. Impaired waters are listed as Category 5 in Part II of the Massachusetts Integrated List of Waters, which is posted at www.mass.gov/dep/brp/wm/tmdls.htm. The types of impairment are in the column labeled “pollutant needing TMDL.”

Part D. Stormwater Management Program Summary

Consult EPA’s MS4 General Permit, Parts II, IV, or V, whichever is appropriate, for descriptions of the required stormwater management programs. “Best Management Practices or BMP’s” are defined in Part VII of the permit. For guidance, you may use EPA’s BMP menu: <http://www.epa.gov/npdes/menuofbmps/menu.htm>. Other BMPs are equally acceptable. Selection of BMPs is a responsibility of the permittee. You may also use EPA’s guidance on measurable goals at the following website or devise your own: <http://www.epa.gov/npdes/stormwater/measurablegoals/index.htm>.

Stormwater Management Program Summary

- List the BMPs you expect to implement for each minimum control measure
- For each BMP, give a unique identifying number.
- For each BMP, provide the department or person responsible for its accomplishment.
- For each BMP, indicate the measurable goal.

Part E. Certification

The NOI must be certified by the original signature of an official, either a principal executive officer or ranking elected official 314CMR 3.15(1)(c). The certification statement applies to all information provided in BRP WM 08A, including the Stormwater General Permit Notice of Intent and Time Frames form.

Part F. Time Frames Form

The MS4 General Permit requires the applicant to provide a [time frame](#) for implementing each selected Best Management Practice (BMP). The Time Frames Form should include when the stormwater management program’s required actions will be undertaken. PLEASE NOTE: The



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Time Frames Form is an Excel computer file separate from the Notice of Intent form and must be downloaded and printed out separately.

1. Print out the form.
2. Enter the Town Name and your DEP Transmittal Form number at the top of the form.
3. For each BMP listed in the NOI Part. D. Stormwater Management Program Summary Section:
 - a. Enter its unique BMP ID # on the Time Frames Form, in the first column at the left;
 - b. Indicate the timing of implementation of the BMP across that row. Each box represents a season or, $\frac{1}{4}$ of a year. Note that the form is organized in permit years not calendar years;
 - c. Use an X for a separate task; or,
 - d. Use a line across a box to indicate continuous activity.
4. Review the Example Time Frames Form for guidance.
5. If more space is needed you may photocopy the form for additional pages. Number the pages.

Part G. Example Time Frames Form

The example Time Frames form has been provided to assist the applicant in describing time frame implementation for each BMP. The BMP's listed as examples are only a part of what might be included in a complete stormwater management program.

The BMPs on the example form would coincide with BMPs listed and numbered in the NOI Part D. Stormwater Management Program Summary Section. Note that an X on the Time Frame Form indicates a separate task during one part of a year, and continuous activities are shown as a line drawn through several seasons and/or years.

BMP ID #	BMP
1X.	Clean Catch Basins: Each spring, summer and fall for permit duration.
2X.	Produce a stormwater video: High School visual arts project in cooperation with Hwy Dept. all 2003-2004 academic year.
3X.	Adopt storm water ordinance: Start drafting in the summer 2003. Talk to all involved boards and departments including the Finance Committee early in the process. Allow time to hold public meetings (Count it as public education). Town Meeting the following spring 2004.
4X.	Purchase more efficient street sweeper: Use capital planning, purchase in 2007.



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- 5X. Street sweeping: All year, as weather dictates, rotating areas of town.
- 6X. Install fore bay at existing detention pond inlet: One in summer 2003, one in 2005.



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Application Completeness List

Application Completeness List

- ☐ The applicant has obtained a copy of the NPDES General Permit for Storm Water Discharges from Small Municipal Separate Storm Sewer Systems from U.S. EPA Region I. The web address is <http://www.epa.gov/ne/npdes/stormwater/index.html>.
- ☐ The applicant has submitted complete information for all BRP WM 08 A forms including the Notice of Intent, and Time Frame form.
- ☐ An official has signed the certification statement, which for municipalities, should be a principal executive officer or ranking elected official.
- ☐ The DEP Transmittal Form is completed.
- ☐ The applicant has also submitted a Notice of Intent with EPA to obtain coverage under the permit. The information provided by the applicant on DEP's BRP WM 08A forms will be accepted by EPA as their Notice of Intent, if all signatures are original.

To submit the General Permit Notice of Intent package:

- ☐ Checklist items have been completed.
- ☐ Send one copy of the BRP WM 08A package along with one copy of the DEP Transmittal Form to:

Department of Environmental Protection
Office of Watershed Management
627 Main Street, 2nd Floor
Worcester, MA 01608

If applicants are fee exempt, a copy of the DEP Transmittal Form must be sent to the address above.

- ☐ Send fee (if applicable) of:

\$80 for BRP WM 08A, in the form of check or money order made payable to "Commonwealth of Massachusetts", along with one copy of the DEP Transmittal Form to:

Department of Environmental Protection
P.O. Box 4062
Boston, MA 02211

- ☐ Keep a copy of the transmittal form and General Permit Notice of Intent package for your records.

For further information or questions please contact Ginny Scarlet, Ginny.Scarlet@state.ma.us (1-508-767-2797) or Linda Domizio, Linda.Domizio@state.ma.us (1-508-849-4005).



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Transmittal Number _____

Facility ID (if known) _____

A. Instructions

Important:
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Submission of this Notice of Intent constitutes notice that the entity named at item B1. of this form intends to be authorized by the DEP General Permit issued jointly with EPA for stormwater discharges from the small municipal separate storm sewer system (MS4), in the location identified at item B2. of this form. Submission of the Notice of Intent also constitutes notice that the party identified at item B1. has read, understands and meets the eligibility conditions of Part I.B. of the NPDES Small MS4 General Permit, agrees to comply with all applicable terms and conditions of the NPDES Small MS4 General Permit, and understands that continued authorization to discharge is contingent on maintaining eligibility for coverage. **In order to be granted coverage, all information required on BRP WM 08A, including the Stormwater Management Program Summary and Time Frames form, must be completed. Please read the permit and make sure you comply with all requirements, including the requirement to develop and implement a stormwater management program.**

B. Applicant Information

1. Small MS4 Operator/Owner Information:

Name

Mailing Address

City/Town

State

Telephone Number

Email (if available)

2. Municipality Name

City/Town

3. Legal Status:

☐ Federal

☐ City/Town

☐ State

☐ Tribal

☐ Private

☐ Other public entity:

Specify Public Entity

4. Other regulated MS4(s) within municipal boundaries:

5. Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for "listed species" and critical habitat been met?

☐ yes

☐ pending

☐ no



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B. Applicant Information (cont.)

6. Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for protection of historic properties been met?

☐ yes ☐ pending ☐ no

Note:
Section C may
be duplicated to
accommodate a
larger list of
receiving waters

C. Names of (Presently Known) Receiving Waters

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____
Name _____	Number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify _____



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Facility ID (if known) _____

D. Stormwater Management Program Summary

1. Public Education:

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

2. Public Participation:

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal



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D. Stormwater Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

4. Construction Site Runoff Control:

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal



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Facility ID (if known) _____

D. Stormwater Management Program Summary (Cont.)

5. Post Construction Runoff Control:

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

6. Municipal Good Housekeeping:

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

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Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal



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D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL:

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

E. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name

Signature

Date